MPNONE	FIL
NONE	ROFIT
CORPO	PATION

E NOW: FILING FEE IS \$61.25

ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

(9)

GRACE COMMUNITY CHURCH, INC.

FILED							
Feb 1	7 199	98 8:0)0am				
Sec	retary	of S	tate				

- D ACTIONIA AND THE BALL COUNTY BROKE SHOW A SON CHANGE STAND BROKE STAND BROKE STAND FOR A STAND FOR THE STAND

Delandari Dian	a at Business	Malling Address						
Principal Plac		Mailing Address				· · · · · · · · · · · · · · · · · · ·		
41 NORTH JEF SUITE 101	FERSON STREET	41 NORTH JEFFERSON S SUITE 101	TREET		3. Date Incorporated or Qualifi	ed		
PENSACOLA F	L 32501	PENSACOLA FL 32501			12/20/1990		1.1.	
					4. FEI Number			oplied For
2 Principal P	lace of Business	2a. Mailing Address			65-0235224			ot Applicable
	Holsberne Rd	26 C SOME			Certificate of Status Desired		•	Additional equired
Suite, Apt.		Suite, Apt. #, etc.			6. Election Campaign Financin		\$5.00	
22 E		27			Trust Fund Contribution	" 🗆	Added to	•
City & State		City & State			7. Is this nonprofit corporation			n?
23 Pon 60		28	I Count				No.	
Zip 325.	Country	Zip	Count	У	8. This corporation owes or ha	· ·		tangible No
24 325	25 Escample Q	29] nt Registered Agent	30		Personal Property Tax due J 10. Name and Address of New			3 140
	9. Hallo and Planta of Control		8	1 Name			,	
WALKER	r, stephen L		-					·
	AX ROAD		8:	Street	t Address (P.O. Box Number is Not Acce	ptable)		
SUITE 1			8:	3				
	COLA FL 32504		8	4 Oits			loc l Zin	Code
			ľ°	4 City		FL	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered agr				d corporation submits this statement for to provide the provided of directors. I hereby a provided when reinstating and application of the provided when reinstating applications and applications are required when reinstating are required are req	DATE		
TITLE	DS OFFICERS AIN	DELETE	1.1 TITLE		ADDITIONS/CHARGES TO C		Change	. Addition
NAME	HELVIE, BRETT		1.2 NAME			-		
STREET ADDRESS	1047 FLAMING DRIVE			ET ADDRESS	:			
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY					
TITLE	Ď	☐ DELETÉ	2.1 TITLE		OP		Change	Addition
NAME	SCHULTZ, KIRK		2.2 NAME		Kirk Schultz. 9708 Shadowwood Dr.			
STREET ADDRESS	9708 SHADOWWOOD DR		2.3 STREE	ET ADDRESS	19708 Shedowwood Dr	,		
CITY-ST-ZIP	PENSACOLA FL		2. 4 CITY	-ST-ZIP	Pansacola, FL 32514			
TITLE	DP	DELETE	3.1 TITLE			-	Change	☐ Addition
NAME	WALKER, STEPHEN L.	•	3.2 NAME		7 V 1921	*** *** ***		
STREET ADDRESS	5195 FLAX RD.			ET ADDRESS	· [
CITY-ST-ZIP	PENSACOLA FL	D Delete	3.4. CITY		+-		Change	Tall Addition
TITLE		☐ DELETE	4.1 TITLE		D. W. Clarack	L	unange	Addition
NAME			4. 2 NAM		DILL SURVOCK			
STREET ADDRESS				T ADDRESS	Bill Shryock 1230 Ramblewood Dr Gulf Breeze, FL 32561			
CITY-ST-ZIP		T DELETE	4.4 CITY -		Guir orcere, PL 31561		Change	Addition
TITLE		ריי טנונון:	5.1 TITLE			ı		ر ۱۵۸ ۱۵۸
NAME			5.2 NAME				<u>"</u>	\ \\\\\
STREET ADDRESS				T ADDRESS			78	$\mathcal{Y}_{I,I}$
CITY-ST-ZIP		DELETE	5.4 CITY- 6.1 TITLE				Change	Addition
TITLE			0.1 1111.0			L	crianilla	Audition

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP